## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/5/9 734 APPLICANT(S)

FILING DATE

CLAIMS

1   2   1     3   4   7     5   6   1     7   1   8     9   1   1     10   1   1     11   1   1     12   1   1     13   14   1     15   1   1     16   1   1     17   1   1     18   1   1     19   1   2     21   1   2     23   1   2     24   1   2     25   2   2     26   2   2     27   2   2     28   29	ENT
1   /     2   /     3   /     4   /     5   /     6   /     7   /     8   /     9   /     10   /     11   /     12   /     13   /     14   /     15   /     16   /     17   /     18   /     19   1     20   1     21   1     22   1     23   24     25   26     27   28     29	
2   /     3   /     4   /     5   /     6   /     7   /     8   /     9   /     10   /     11   /     12   /     13   /     14   /     15   /     16   /     17   /     18   /     19   /     20   /     21   /     22   /     23   /     24   /     25   /     26   /     27   /     28   /     29   /	EP.
3   /     4   /     5   /     6   /     7   /     8   /     9   /     10   /     11   /     12   /     13   /     14   /     15   /     16   /     17   /     18   /     19   /     20   /     21   /     22   /     23   /     24   /     25   /     26   /     27   /     28   /     29   /	
4   /     5   /     6   /     7   /     8   /     9   /     10   /     11   /     12   /     13   /     14   /     15   /     16   /     17   /     18   /     19   /     20   /     21   /     22   /     23   /     24   /     25   /     26   /     27   /     28   /     29	
6	
7   1     8   1     9   1     10   1     11   1     12   1     13   1     14   1     15   1     16   1     17   1     18   1     19   1     20   1     21   2     23   1     24   1     25   2     26   2     27   2     28   29	
8   /     9   /     10   /     11   /     12   /     13   /     14   /     15   /     16   /     17   /     18   /     19   /     20   /     21   /     22   /     23   /     24   /     25   /     26   /     27   /     28   /     29   /	
9	
10	
11   12   13     13   14   15     16   17   18     19   1   20     21   1   22     23   1   22     23   24   1     25   26   27     28   29	
13	
14	
15	
16	
17	
18   19   20   21   22   23   24   25   26   27   28   29	
19	_
21	
22	
23	
24 25 26 27 28 29	
25 26 27 28 29	
26	
28 29	
29	
	_
30 31	$\dashv$
32	
33	$\overline{}$
34	
35	
36 37	_
38	
39	┥
40	⇥
41	
42 43	_
43 44	
45	$\dashv$
46	ᅱ
47	
48	_
50	_
OTAL IND.	
TOTAL DEP 26 4 FEMALES	
CLAIMS Q7	

			TLED		TER NDMENT	AF 2 <sup>m</sup> ame	TER NOMENT
<u> </u>		IND.	DEP.	IND.	DEP.	IND.	DEP.
	51	<b> </b>					
	52 53	<del> </del> -					
	54	<del> </del>	<del>                                     </del>				
	55						
	6			<u> </u>			
	57					<u> </u>	
5	8						<u></u>
	9						
	0						
	1		·				
	2						
	3		<u>_</u>				
	<u>4</u> .	<del></del>					
$\frac{1}{6}$							
6				<del></del>			
6							
6						<del>·                                    </del>	
7							
7							
7							
7.	3						
7:							
70							
77		<del></del>				$-\!-\!\!\!-\!\!\!\!-$	
78				<del></del>		<del></del>	
79				-		-+	
80							
81							
82							
83							
84 85			<u> </u>				
86			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>			
_ 87					<del></del>		
88				-+		<del></del>	
89						<del> +</del>	
90							
91							
92 93							
94		<del> </del> -	<del></del>  -				
95		<del></del>					
96							-
97							$\neg \neg$
98							
99							
100	4	-	<u></u> - _				
TOTAL	ND.		4		4		春
TOTAL			(20		Tes .		(=
CLADA						2	
		U.S	S. DEPARTM	ENT of COM	MERCE		<del></del>

U.S. DEPARTMENT of COMMERCE

PTO-1360 (REV 11MA